

***Office of the Assistant Secretary
of Defense for Health Affairs***

***Operational Stress and Deployment
Mental Health***

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OEF/OIF**















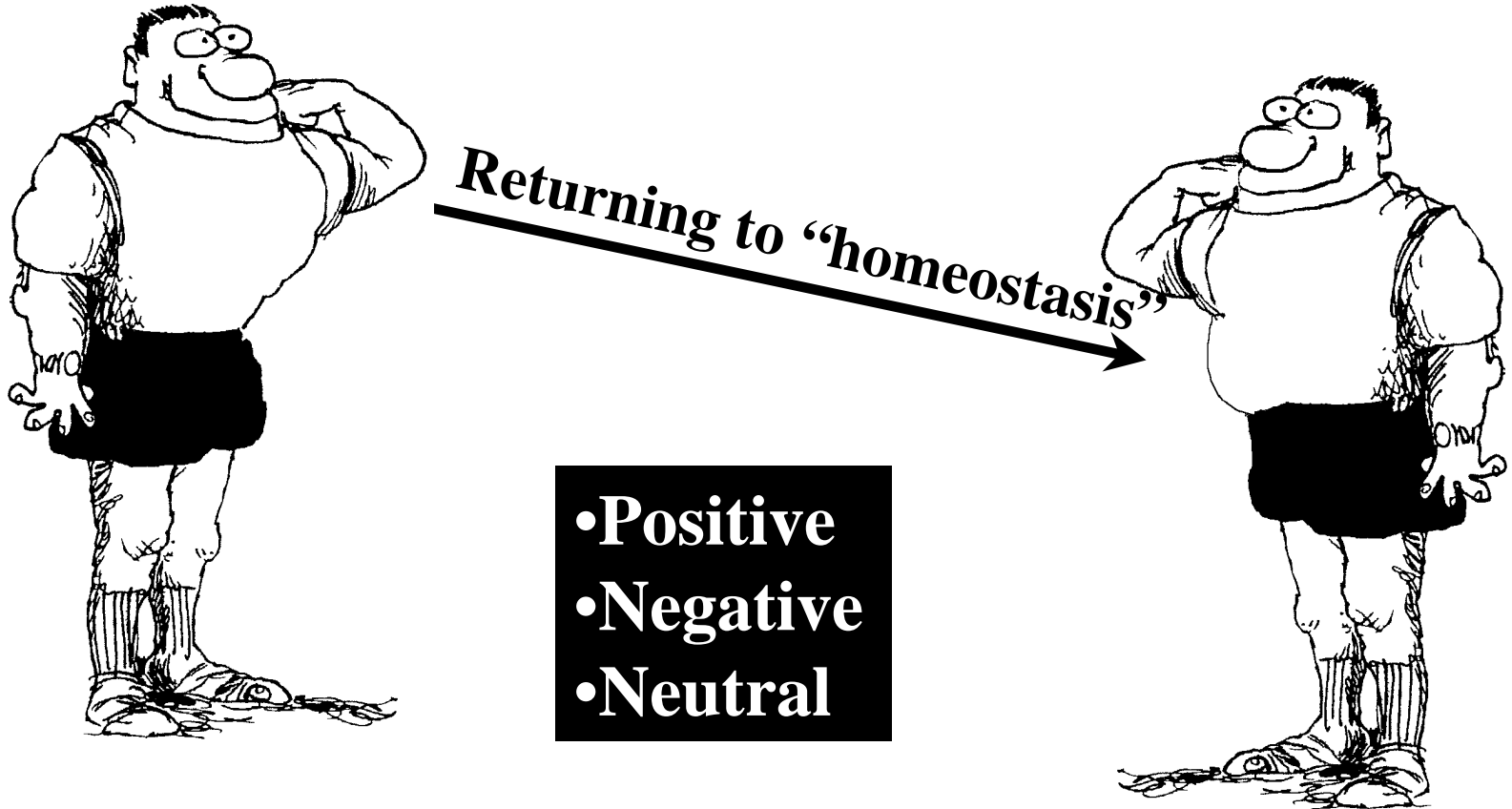








Stress = Pressure to Adapt



Demand Pressure Threat



The Stress Story

- **Fight or Flight**
- **Sprint vs. Marathon**
 - The “Juice” – Good or Bad
 - Acute and Chronic
 - The Treadmill
 - Juice Leftovers



Stress Response

Change	Acute Effect	Chronic Effect
Cardiovascular Changes	<ul style="list-style-type: none"> •Increase pulse, respiration, •Blood to muscles, organs, brain •Blood thickens to control bleeding 	Dizziness Cold hands/feet
Muscle Tension	Ready to run or fight	Headaches, body pain
Insulin, blood sugar	Increase energy	Fatigue, irritability, eating, moodiness
Adrenaline, endocrine changes	Increase energy, alertness	Restlessness, fatigue, sleep, irritability, anger, edgy, productivity decline, decreased immunity
Sharpened vision, attention	Hyper-alert to environment, scan for threats	Channelized attention, distraction, preoccupation, concentration, memory, abstract problem solving, decision-making, errors
Change in digestive system	Channelize energy to muscles, brain	Indigestion, stomach ache

Physical, Emotional, Cognitive, Behavioral



Red Lines

INDIVIDUAL

- ↑ Fatigue
- ↑ Angry, argumentative
- ↑ Isolation
- ↓ Sleep
- ↑ Over-reacting, impulsive
- ↑ Jumpy, nervous, moody
- ↑ Weight up and down
- ↓ Disregard appearance, customs & courtesies
- ↑ Frequent illness
- ↑ Taking unnecessary risks

UNIT

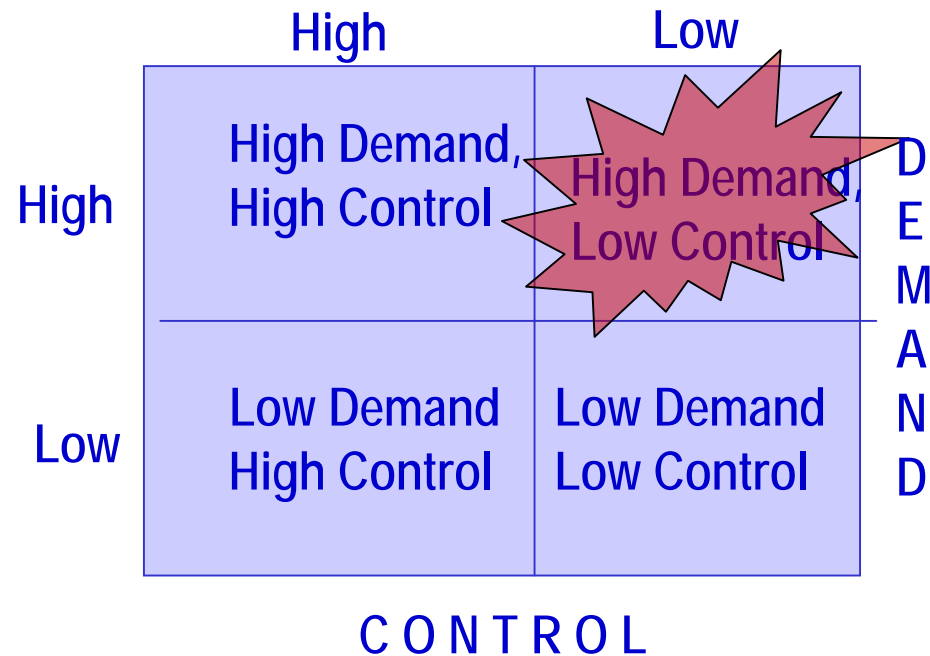
- ↑ Mistakes and mishaps
 - Channelized attention
 - Slow reaction time
 - Misperceptions
 - Low SA
- ↓ Productivity/Quality decline
- ↓ Decline in retention



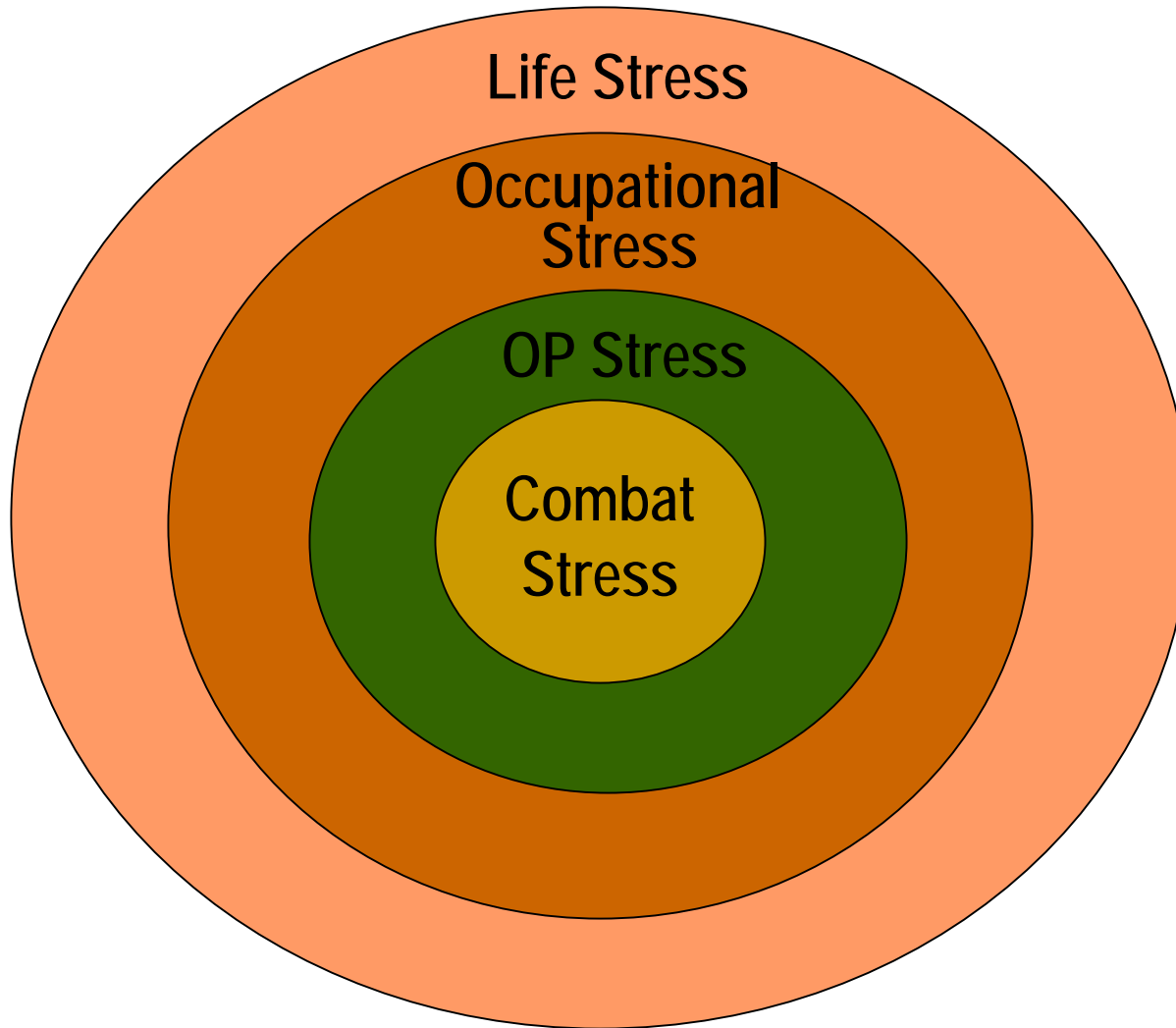
Chronic Occupational Stress

What can we learn from research

- **Primary Buffers**
 - Demographics
 - Control
 - Predictability
 - Training/preparation
 - Information
 - Support
 - Technical
 - Emotional
 - Instrumental
 - Supervisory



Combat and Operational Stress - COS



Operational Stress Threat Laydown

- You're not in Kansas anymore
 - Not the familiar system or culture or home installation job, esp. RC
 - Everyday life is more complicated and less comfortable
- Where's the Fire - Urgency, urgency everywhere
- Groundhog Day
 - Long hours, every day
 - Marathon, not a sprint; people on fire, burnout
- Double-edged Comm
 - It's great to keep in touch
 - Can't fix home front problems long distance
- Social Scene
 - May be separated from familiar support systems
 - Lack of privacy
- Grass is Greener – High TEMPO at home



Combat and Operational Stress

- **Combat Stress – Trauma of War**
 - War of insurgency
 - Uncertainty, lack of control and trust
 - Infiltration and corruption
 - Constant bombardment
 - Killing and wounding
 - Death and dying
 - Horrible Images

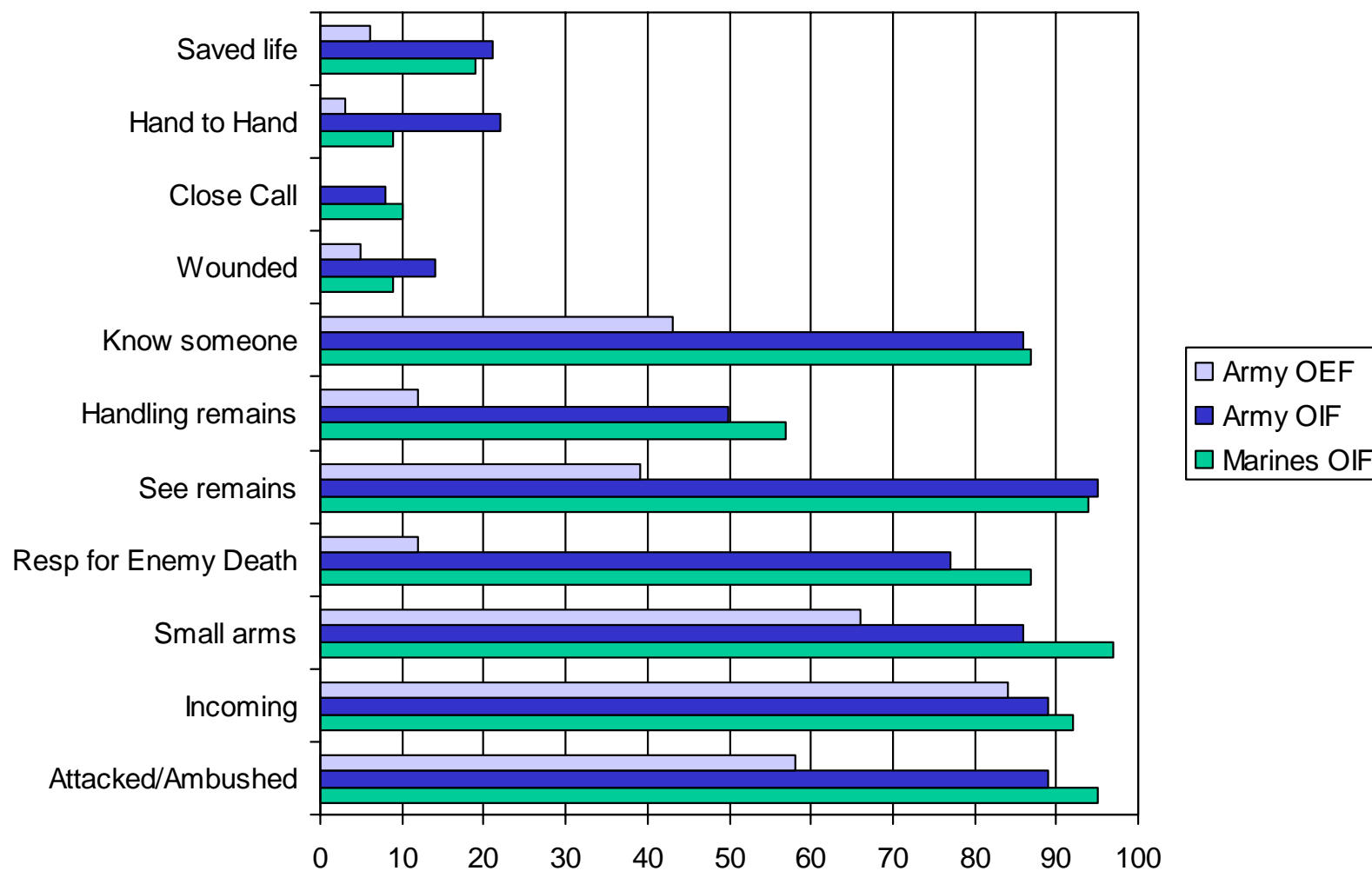


OIF/OEF Mental Health Research

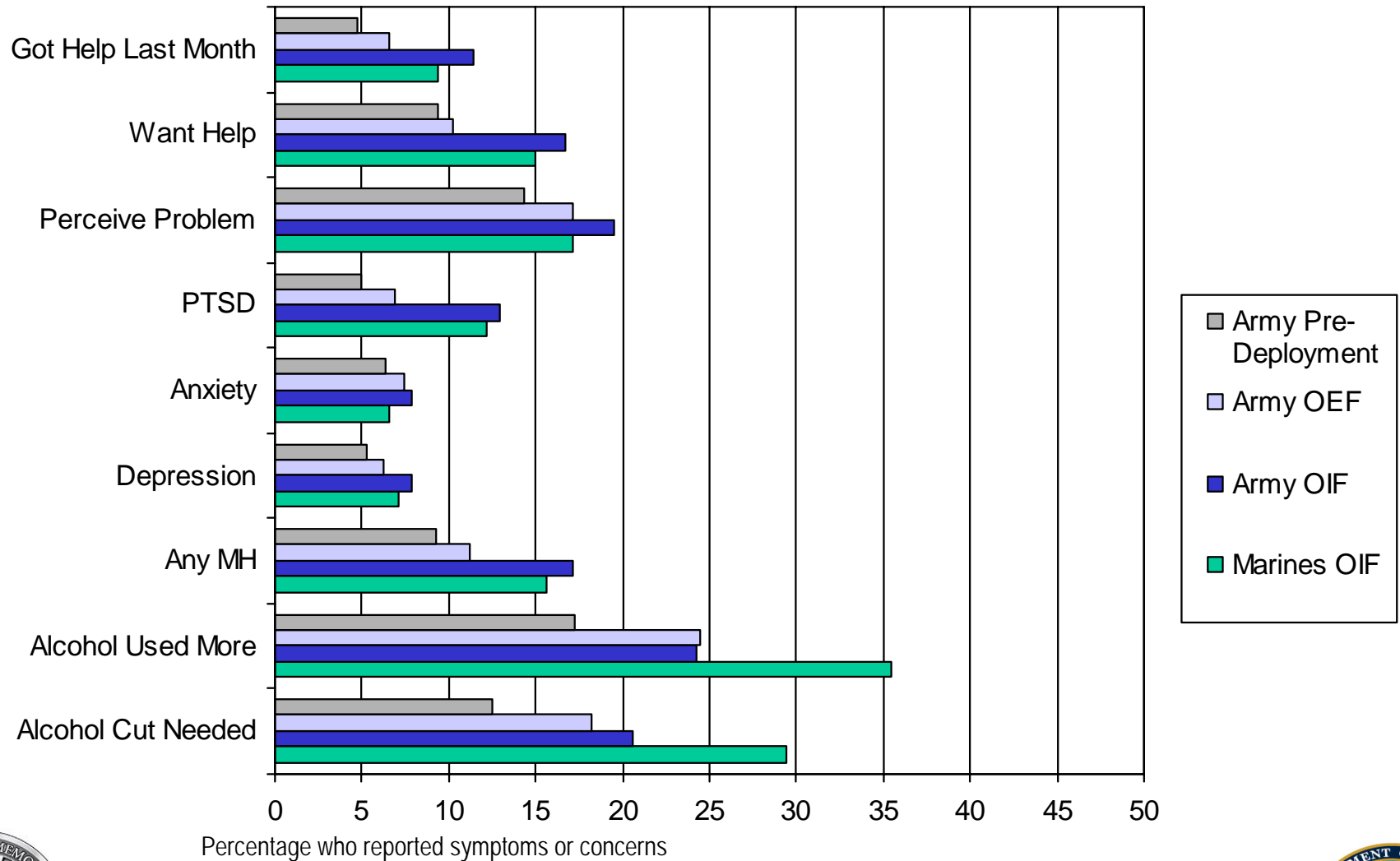
- WRAIR study, Hoge, et al
 - New England Journal of Medicine, July 2004
- 3 Army, 1 Marine Unit – anonymous survey
 - Before deployment to Iraq – N=2530 (Army only)
 - March 2003
 - After return return OIF/OEF (3-4 mo) – N=3671
 - Oct – Dec 2003
 - Standardized screening for depression, anxiety, PTSD



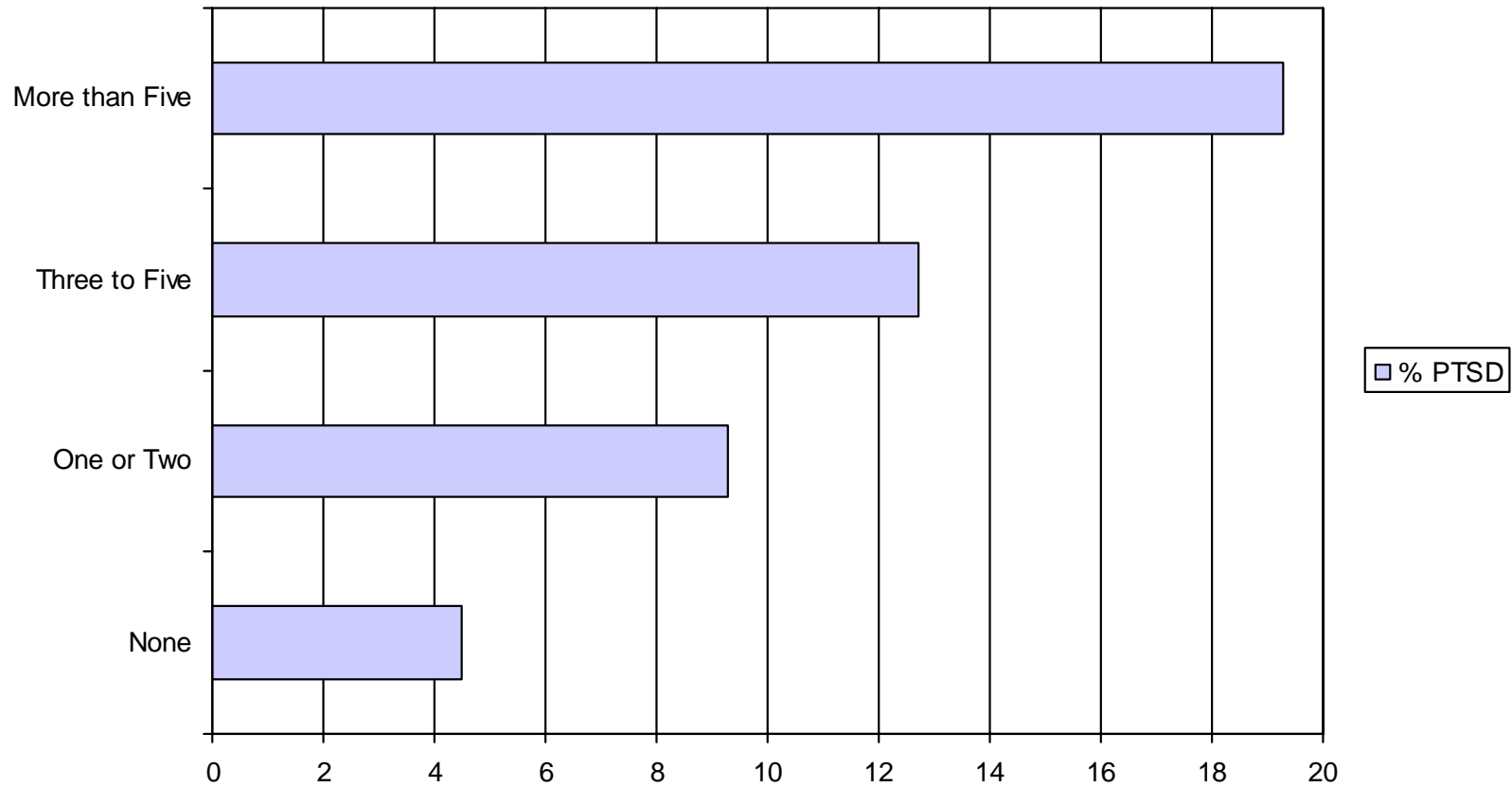
Combat Experiences in OIF/OEF



Reported MH Symptoms



PTSD Compared to Firefight



Percent of all respondents in Iraq who reported PTSD symptoms
based on number of reported firefights during that deployment



Defense Medical Surveillance System

Mental Health Questions on Post-Deployment Health Assessment

10. Are you currently interested in receiving help for a stress, emotional, alcohol or family problem?

☐ No ☐ Yes

12. Have you ever had any experience that was so frightening, horrible, or upsetting that, IN THE PAST MONTH, you

No Yes

- | | | |
|-----------------------|-----------------------|---|
| <input type="radio"/> | <input type="radio"/> | Have had any nightmares about it or thought about it when you did not want to? |
| <input type="radio"/> | <input type="radio"/> | Tried hard not to think about it or went out of your way to avoid situations that remind you of it? |
| <input type="radio"/> | <input type="radio"/> | Were constantly on guard, watchful, or easily startled? |
| <input type="radio"/> | <input type="radio"/> | Felt numb or detached from others, activities, or your surroundings? |

11. Over the LAST 2 WEEKS, how often have you been bothered by any of the following problems?

None Some A Lot

- | | | | |
|-----------------------|-----------------------|-----------------------|--|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Little interest or pleasure in doing things |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Feeling down, depressed, or hopeless |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Thoughts that you would be better off dead or hurting yourself in some way |

13. Are you having thoughts or concerns that ...

No Yes Unsure

- | | | | |
|-----------------------|-----------------------|-----------------------|--|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | You may have serious conflicts with your spouse, family members, or close friends? |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | You might hurt or lose control with someone? |

4. During this deployment have you sought, or do you now intend to seek, counseling or care for your mental health?

☐ Yes ☐ No



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Service Members with DD 2796 submitted since 01JAN2003, percent affirmative responses

	SMs with DD 2796 at AMSA	General Health ("fair" or "poor")	Medical/Dental Problems	Currently on Profile	Mental Health Concerns	Exposure Concerns	Health Concerns	Referral Indicated	Med. Visit Following Referral*
Active Duty									
Army	183,940	9%	28%	10%	5%	18%	14%	26%	93%
Navy	71,176	5%	12%	1%	2%	5%	6%	6%	67%
Air Force	66,778	2%	11%	2%	1%	5%	5%	10%	78%
Marines	59,409	6%	18%	3%	2%	11%	8%	12%	62%
Total	381,303	6%	21%	6%	3%	12%	10%	17%	87%
Reserve Component									
Army	156,219	11%	41%	15%	6%	23%	21%	25%	78%
Navy	11,414	5%	35%	5%	3%	15%	21%	17%	87%
Air Force	25,819	3%	17%	2%	1%	10%	9%	12%	60%
Marines	12,988	9%	35%	4%	3%	28%	23%	24%	56%
Total	206,440	9%	37%	12%	5%	21%	20%	23%	76%

* Inpatient or outpatient visit within 6 months after referral

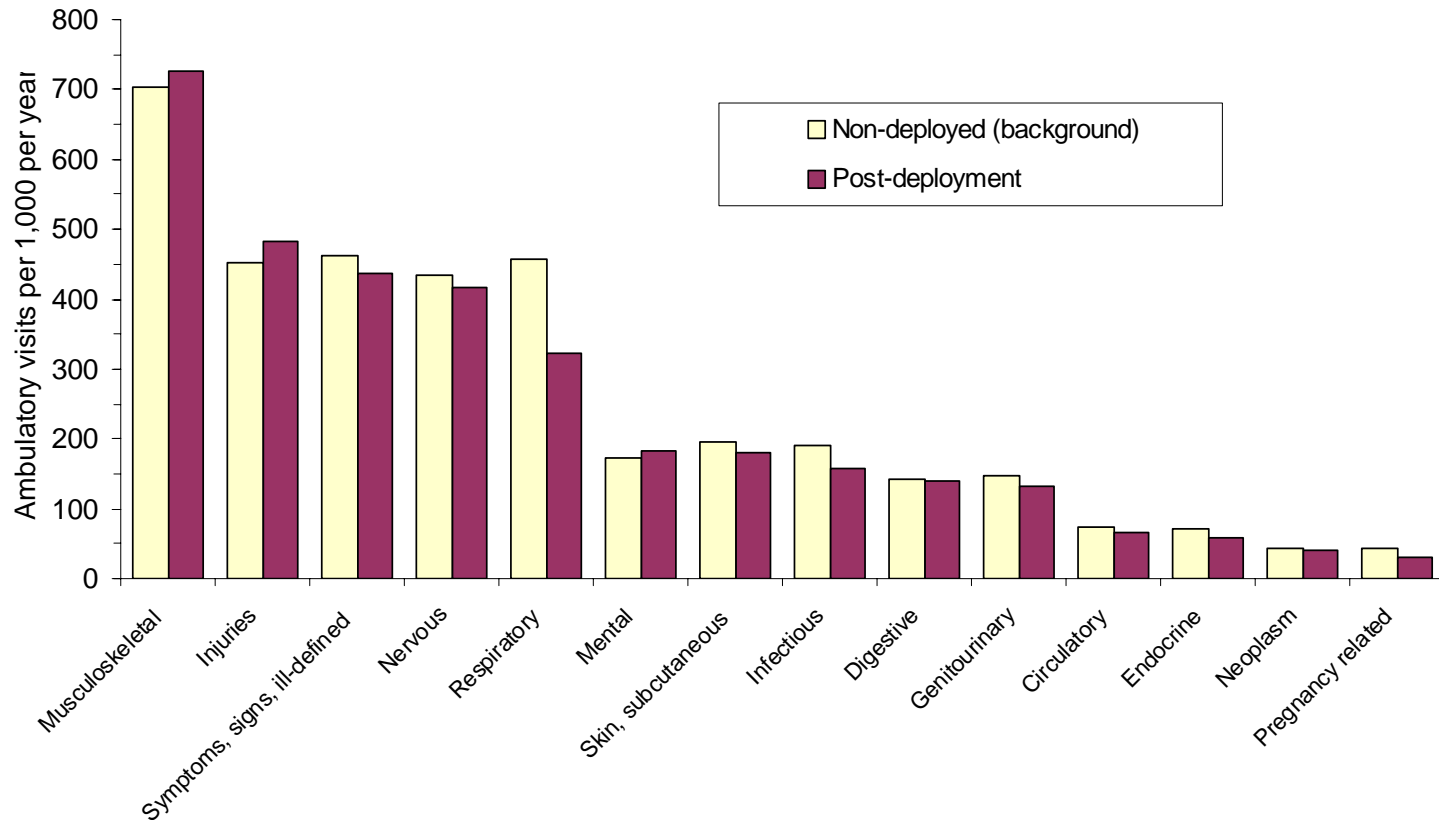


*Rubertone, M. Mental Health Impact of Operations, TRICARE Conference, Jan 2005.



Defense Medical Surveillance System

Ambulatory Visit Rates by Major Diagnostic Category in Relation to Deployment to OEF/OIF, Active Duty Servicemembers, October 2002 -- August 2004

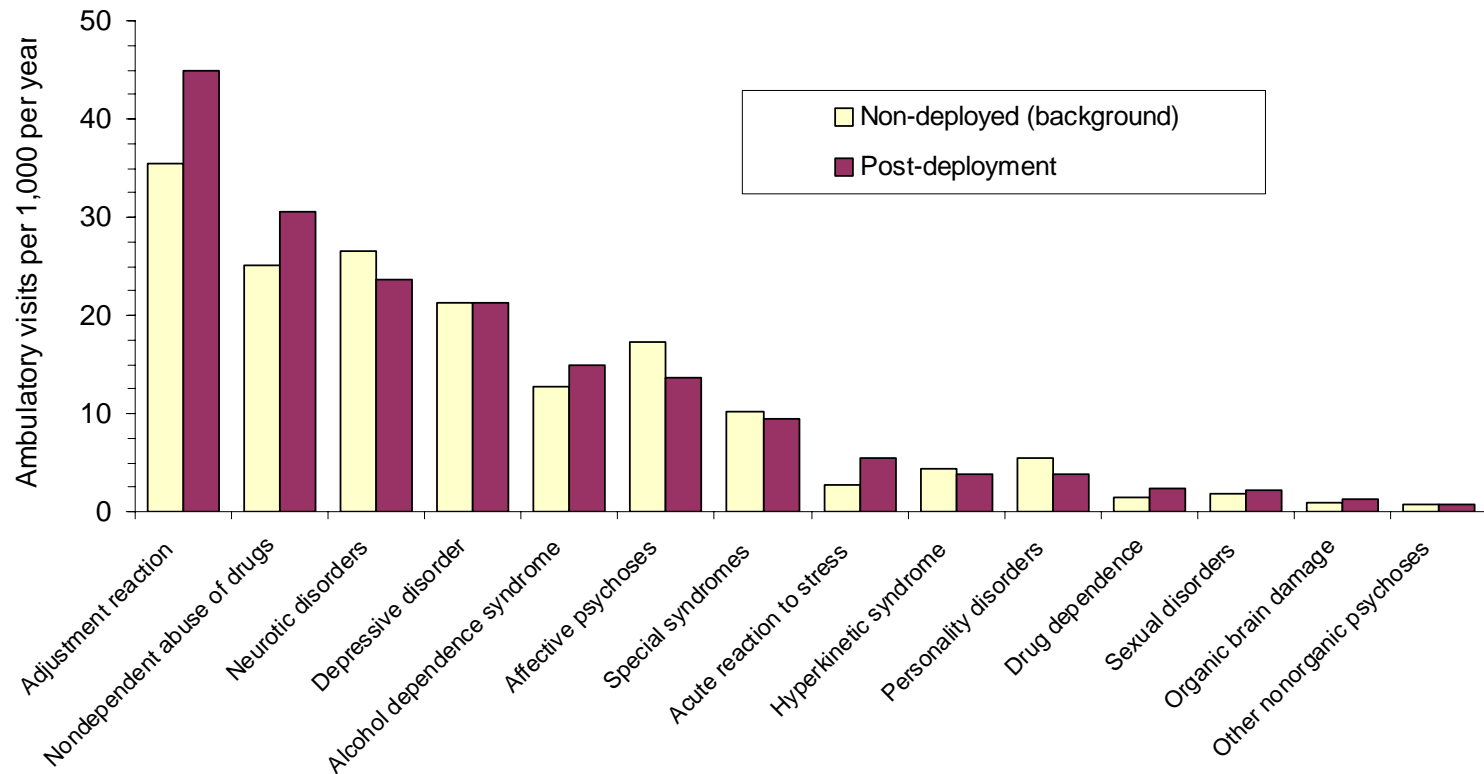


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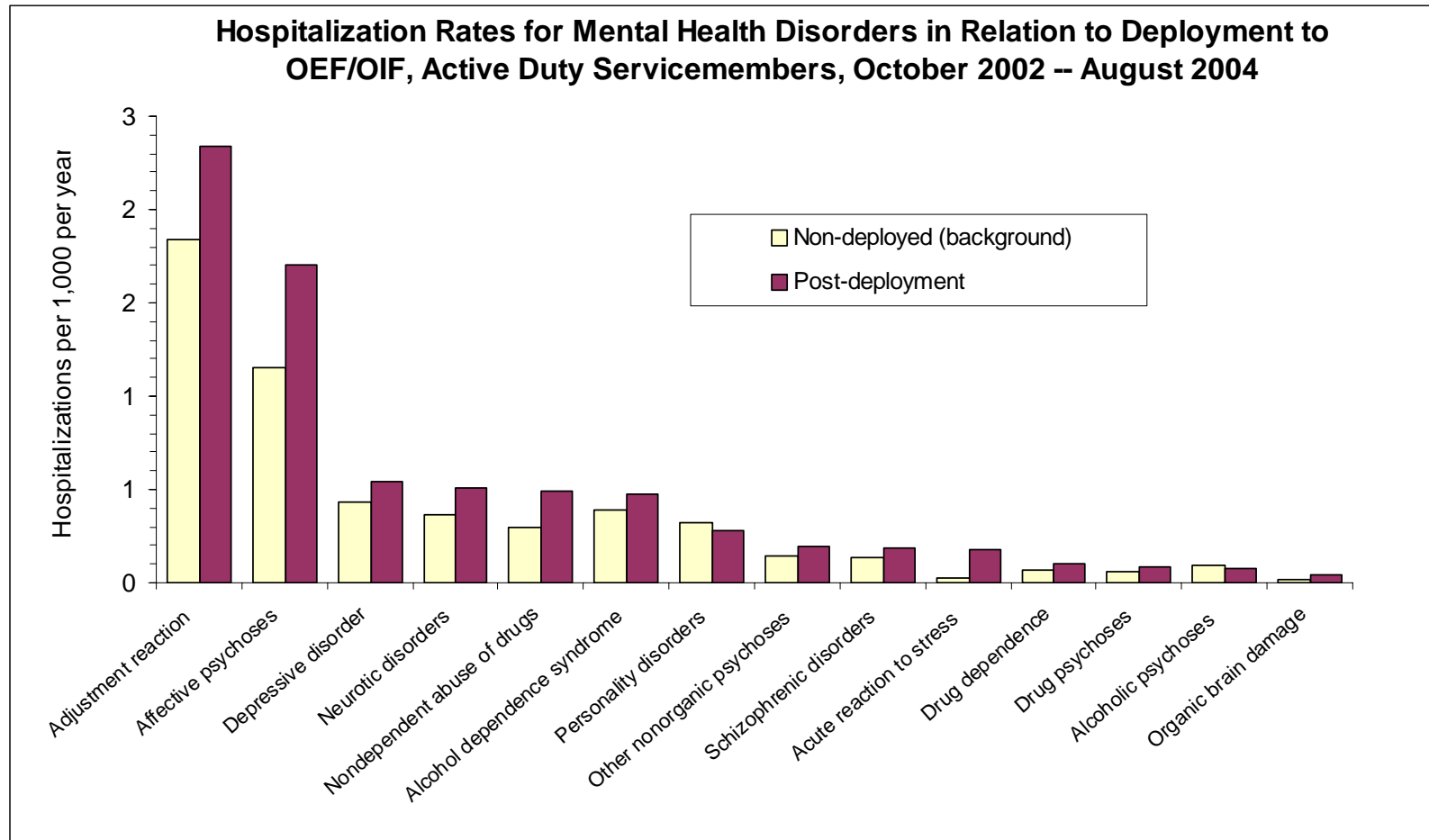
Ambulatory Visit Rates for Mental Health Disorders in Relation to Deployment to OEF/OIF, Active Duty Servicemembers, October 2002 -- August 2004



*Rubertone, M. Mental Health Impact of Operations, TRICARE Conference, Jan 2005.



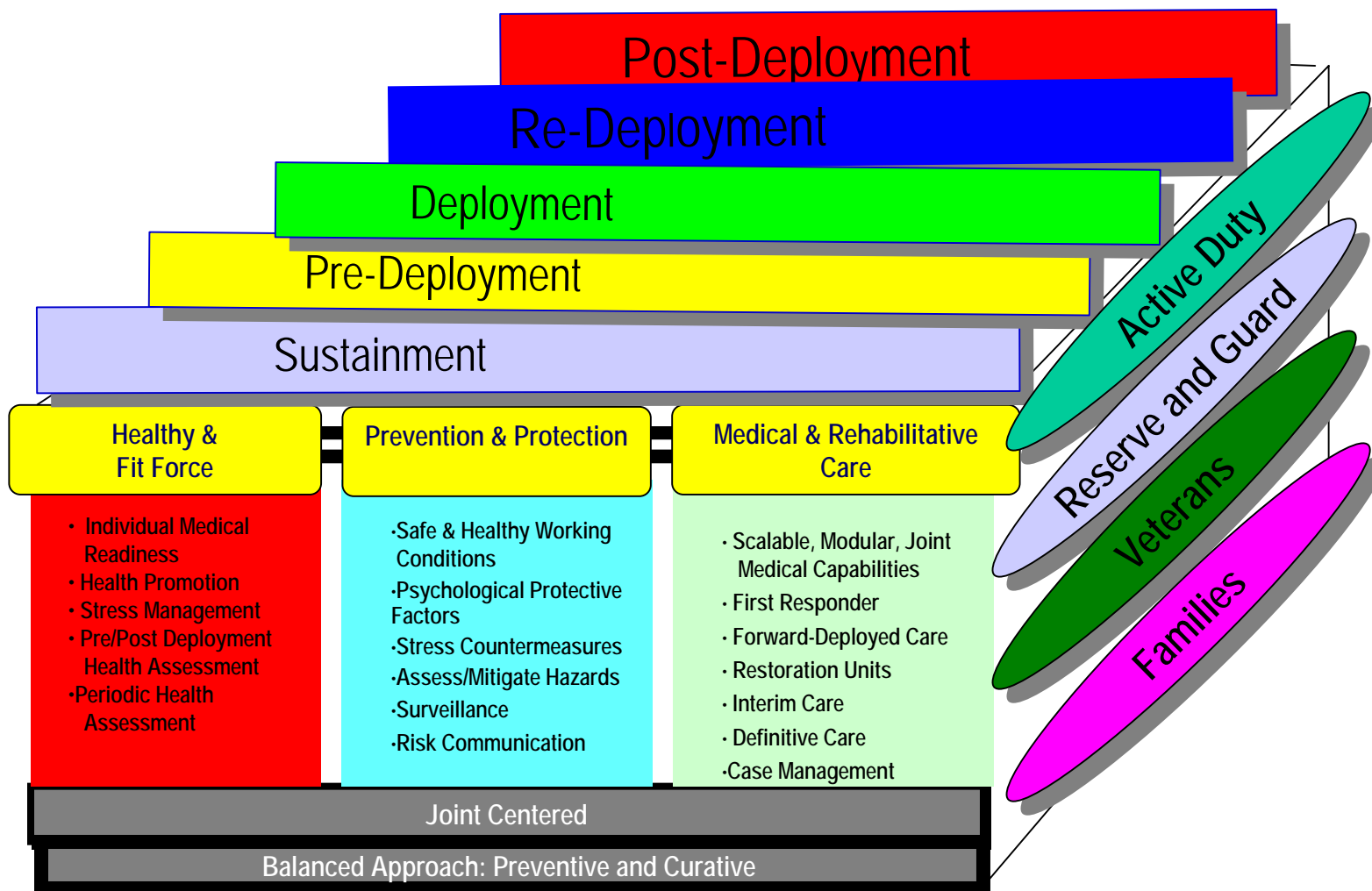
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Deployment Mental Health...A Multi-dimensional Issue



Programs and Policies

- **Combat Stress and Deployed Mental Health**
 - Bring together many other groups working on similar issues
 - Joint, DoD, Service, VA coordination
 - Newly developed Joint OSDMH Working Group
 - Re-examine and rewrite Combat Stress Control Regulation and Guidance
 - Update based on new information
 - Joint Focus – Interoperability



Programs and Policies

- **Redeployment**

- PDHA – Post-Deployment Health Assessment (DD2796)
- Risk Communication and Benefits Briefing

- **Post-Deployment**

- Deployment Cycle Support/Education
- Leadership and Peer support – Unit reintegration
- Family Reintegration
- PDHRA – Post-Deployment Health Re-Assessment



Programs and Policies

- **Across Cycle**

- Military One Source
- Behavioral Health in Primary Care
- PDH CPG and supporting Guidelines
 - Evidence-based Mental Health Services
 - Depression, Acute Anxiety, PTSD, Ill-defined Conditions
- Specialized Care Program
- Case and care management



Questions

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